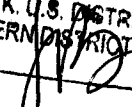


FILED

AUG 29 2018

CLERK, U.S. DISTRICT COURT
WESTERN DISTRICT OF TEXAS
BY  DEPUTY

Attachment 1 - Civil Complaint

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF TEXAS
____ WACO _____ DIVISION

Magnolia E. Doerr

(Enter your full name)
Plaintiff(s)

CASE NUMBER:

W1801.257

(Supplied by Clerk's Office)

Texas Workforce Commission UI General Counsel

(Enter full name of each Defendant)
Defendant(s)

COMPLAINT

First Paragraph (Name and Address of Plaintiff)

Second Paragraph (Name and Address(es) of Defendant(s))

Third Paragraph (Jurisdiction Plea)

Fourth Paragraph (Allegation 1)

Fifth Paragraph (Allegation 2) ...

The final paragraph should contain a statement of the relief you are seeking. This paragraph should not be numbered.



Signature

8/28/2018

Name (Typed or Printed) Magnolia E. Doerr

Address 99 Mary Jane Circle, Copperas Cove, TX 76522

Telephone Number 254-290-5710

TEXAS WORKFORCE COMMISSION

Austin, Texas

FINDINGS AND DECISIONS OF COMMISSION
UPON REVIEW OF CLAIM FOR BENEFITS**JUL 31 2018**

Date Mailed

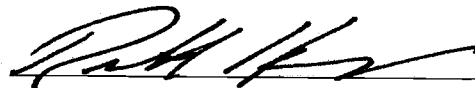
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TMAGNOLIA E DOERR
99 MARY JANE CIR
COPPERAS COVE, TX 76522-1126Case Number:
2253947-3E
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RTEXAS DEPARTMENT OF
CRIMINAL JUSTICE- DEPT 696
% TERRY BAILEY
2 FINANCIAL PLZ STE 600
HUNTSVILLE, TX 77340-3558Social Security Number:
XXX-XX-8256Prior Decision Date:
June 14, 2018Appeal Filed by: Claimant

On June 14, 2018, the Commission issued a decision in Case Number 2253947-2. The claimant has now filed a timely motion for rehearing in accordance with the provisions of Section 212.153 of the Texas Unemployment Compensation Act.

The Texas Administrative Code at 40 T.A.C. 815.17 provides that a motion for rehearing shall not be granted unless each of the following three criteria is met:

- (A) there is an offering of new evidence, which was not presented at the Appeal Tribunal level;
- (B) there is a compelling reason why the evidence was not presented earlier and,
- (C) there is a specific explanation of how consideration of the evidence would change the outcome of the case.

The Commission has considered the motion for rehearing and is of the opinion that it does not meet the criteria of Rule 17 and that the Commission's decision of June 14, 2018 was proper. Accordingly, a rehearing is denied.


Andres Alcantar
Commissioner Representing the Public

Ruth R. Hughes
Commissioner Representing Employers

I maintain the previous dissent in this case


Julian Alvarez
Commissioner Representing Labor

TEXAS WORKFORCE COMMISSION
COMMISSION APPEALS
101 EAST 15TH ST
AUSTIN TX 78778-0001

Appeal Rights from Motion for Rehearing Decision

A copy of the decision of the Texas Workforce Commission regarding the motion for rehearing made in this case is either printed on the reverse side of this form or attached. The decision will become final fourteen (14) days after the date of mailing of the decision. The date of mailing is set out at the top of the decision. All mailing dates are shown as month, day and year. Should you disagree with this decision, and wish to pursue the matter further, your **ONLY** recourse at this point is to file suit. In effect, such suit should be filed from the 15th through the 28th day after this decision was mailed. Further correspondence with the Commission will **NOT** serve to preserve your rights in this case.

Chapter 212 of the Texas Unemployment Compensation Act provides in Subchapter E that a party aggrieved by a final decision of the Commission may obtain judicial review of the decision by bringing an action against the Commission in a court of competent jurisdiction in the county of claimant's residence for a trial de novo review of the decision. Such action must be brought between the 15th and the 28th day after the date of the Commission decision, and each other party to the proceeding before the Commission must be made a defendant in such action. If the claimant is not a Texas resident, such action must be filed in Travis County, or the Texas county where claimant's last employer has its principal place of business, or in the Texas county of claimant's last residence. The petition in such action must state the grounds on which review is sought, and must be served on a member of the Commission or on General Counsel, Suite 608, 101 E 15th St., Austin TX 78778, the person designated by the Commission to receive service on its behalf and there must be left with such person as many copies of the petition as there are defendants. This constitutes completed service on all parties, and the Commission immediately shall mail one copy of the petition to each defendant.

NOTICE TO CLAIMANT:

You must continue to conduct an active work search and keep records.

Attachment 1 – Civil Complaint

First Paragraph : Magnolia E. Doerr – 99 Mary Jane Circle, Copperas Cove, Texas 76522

Second Paragraph : Texas Workforce Commission/General Counsel

101 E 15th Street, Suite 608

Austin, Texas 78778

Third Paragraph : Jurisdiction Plea (please refer to another page attached)

Fourth Paragraph : Allegation 1 (please refer to another page attached)

Fifth Paragraph : Allegation 2 (please refer to another page attached)

Final Paragraph : Statement of Relief

Attachment 4 – Motion To Proceed In Forma Pauperis

3. Other Income

- | | |
|---|---------------|
| a.) Business/Profession – U.S. Army Reserve – July 2018 | - \$ 1,562.00 |
| d.) Disability – VA service connected disability – monthly | - \$ 936.00 |
| e.) Gift – Soldier’s Wish Foundation – help in car payment | - \$ 2,500.00 |
| f.) any other sources – Catholic Charities Veterans Program | - \$ 927.60 |

Jurisdictional Plea

To the Honorable Judge:

I am writing this letter as my statement to seek consideration to the court to hear my plea that I do believe the court has jurisdiction over my Texas Workforce Commission Unemployment complaint. I am filing in court today the 28th August 2018, "**Motion for Rehearing Decision**" and for the court "**to grant**" my filing for a "**Pro-Se**" and "**Motion to Proceed in Forma Pauperis**". I also appealing for a "**motion to appointment of counsel**".

Allegations/Factual circumstances:

1. On October 23, 2018, I was told to go home and not to come back to work until I am cleared by my primary care doctor due to hallucination that may result from prescription drugs due to my service connected disability medication. I was not instructed anything on what to do but to follow what I was verbally told.

I asked if I was fired and Lt. Brenda Henry had shaken her head and told me repeatedly to follow what I was told. Meaning, I have to be cleared by my primary care doctor who prescribed me those medication. Unfortunately, due to VA Mental Health departments policy, I was not appropriately cleared out to go back to work by my primary care provider.

2. On October 28, 2018, I decided not to go back to work because nobody from the HR staff has properly informed me that I can go back to work. Around November 30, 2018, HR officer Karen Woody informed me to bring all of the government issuance to turn them in. I followed and cooperated with the order because I don't want to be in trouble for keeping government stuff. The same day I was trick to sign a resignation documents and was assured that I will be getting un-employment if I will resign, despite my argument that I can get unemployment insurance benefits if I am fired which is I think I was terminated because I got sent back home.

3. I pray that the court will appoint me a counsel to help me prepare and understand the process in filing the case and for the reason of my incapability and in ability to understand legal process.

4. I also believe that I have provided enough facts to the best of my knowledge and will provide even more facts soon.

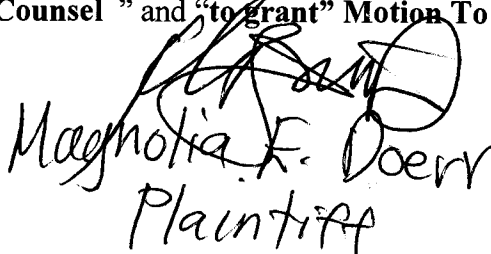
Relief:

1. I ask the judge "**to grant**" this plea and for the judge "**to appoint me a counsel**". A counsel is a must; and must be appointed to help me stablish a deliverance/argument at my case in court.

2. Another relief I requested is for the court to grant my "**motion to re-appoint counsel**" appeal; and will appoint me a counsel.

3. The final relief I am seeking is that the appointed counsel will help me seek any court cost owed by me from the other party (defendant).

In closing, I pray that the court will hear my "**Civil Complaint**" and "**Motion To Appointment Counsel**" and "**to grant**" "**Motion To Proceed in Forma Pauperis**".


Magnolia F. Doerr
Plaintiff
8/28/18

Fourth Paragraph: Allegation 1

On October 23, 2018 I came to work and was told to go home and can not come back until I am cleared by my primary care doctor stating "I am good to go back to work". Meaning, I have to have a doctor's recommendation that I don't have history of hallucinations from my service connected disability and for the prescription medicine is free of hallucinogens. Due to VA hospital's mental health record policy, the doctor failed to write me recommendations from that time on I was not back to be working at TDCS. I considered myself "terminated" and seek advice from a certain counsel on what to do. On the 26th of October 2018, Atty. Andrews told I can start applying for unemployment benefits which I planned after that day.

Fifth Paragraph: Allegation 2

On or around November 30, 2017, HR staff Karen Woody called me and told me to surrender government issues; ID and uniforms. I did come in and return because I don't want to be in trouble. Then she tricked me in signing a resignation assuring me that I have to sign the papers for me to get a claim of unemployment benefits and also my work employee records would be good. But then after I signed Karen Woody berated me that I really do not understand English; I completely do not comprehend of what she was saying. In my understanding that she tricked me to cover herself. Aside from me arguing that I won't

sign the paper because I did not quit. I came to work willingly and but told to go home. I argue with Karen Woody in front of her secretary Mr. Jones I believe so that I can get a claim of an employment being fired. I alleges TDCS that terminated my employment on the 23rd October 2014.

I also alledge that TDCS has just made my life miserable because I receive few response form companies I applied that I can not permanently employed. What did I do wrong? Furthermore, TDCS has sought denial of my unemployment benefits which is not really very fair. I felt I have done a crime being punished as such.

[Signature] 8/28/2018

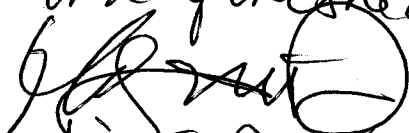
~~Fifth Paragraph~~

Final Paragraph: Statement of Relief

- a) I will dig and seek all and new evidences to offer for this case which was not presented at the Appeal level.
- b) I will explain compelling reason showing why the evidence was not properly presented earlier time.
- c) I will show specific reason/explanation for the evidence to be considered so to change the outcome of the case.

I pray and seek the judge mercy to consider and grant this position to re-open unemployment insurance benefit claim and re-consideration of my appeal for motion for a new hearing to show and submit all pertaining evidence and documents.

I ask the judge to consider appointing me a court appointed counsel to fully understand and finished this case.


Magistrate F. Doerr 8/18/2018

JS 44 (Rev. 06/17)

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS

Magnolia F. Doerr

(b) County of Residence of First Listed Plaintiff

(EXCEPT IN U.S. PLAINTIFF CASES)

Coryell

(c) Attorneys (Firm Name, Address, and Telephone Number)

"Pro-Se"

DEFENDANTSTexas Workforce Commission
101 E 15th Street, Suite 608
Travis

County of Residence of First Listed Defendant

(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

Commissioner General Counsel

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff ☒ Federal Question (U.S. Government Not a Party)
- ☐ 2 U.S. Government Defendant ☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- Citizen of This State ☒ PTF 1 ☒ DEF 1 Incorporated or Principal Place of Business In This State ☒ PTF 4 ☒ DEF 4
- Citizen of Another State ☐ 2 ☐ 2 Incorporated and Principal Place of Business In Another State ☐ 5 ☐ 5
- Citizen or Subject of a Foreign Country ☐ 3 ☐ 3 Foreign Nation ☐ 6 ☐ 6

IV. NATURE OF SUIT (Place an "X" in One Box Only)

Click here for: Nature of Suit Code Descriptions.

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES	
<input checked="" type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input type="checkbox"/> 362 Personal Injury - Medical Malpractice	PERSONAL INJURY <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care/Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other LABOR <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act IMMIGRATION <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 465 Other Immigration Actions	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XV1 <input type="checkbox"/> 865 RSI (405(g)) FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes
REAL PROPERTY <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	CIVIL RIGHTS <input type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education	PRISONER PETITIONS Habeas Corpus: <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty Other: <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement			

V. ORIGIN (Place an "X" in One Box Only)

- ☐ 1 Original Proceeding ☐ 2 Removed from State Court ☒ 3 Remanded from Appellate Court ☐ 4 Reinstated or Reopened ☐ 5 Transferred from Another District (specify) ☐ 6 Multidistrict Litigation - Transfer ☐ 8 Multidistrict Litigation - Direct File

VI. CAUSE OF ACTION

Under the U.S. Civil Statute under which you are filing: Section 212.153 of the Texas Unemployment Compensation Act
 Description of cause: Texas Administrative Code 40 TAC 85.17 Motion for Re-hearing

VII. REQUESTED IN COMPLAINT:

☐ CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.

DEMAND \$

CHECK YES only if demand in complaint:

JURY DEMAND: ☐ Yes ☒ No**VIII. RELATED CASE(S) IF ANY**

(See instructions):

JUDGE

DOCKET NUMBER

DATE

SIGNATURE OF ATTORNEY OF RECORD

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE